## 120001571

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
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Y SULKER



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301

P: 866.625.0838 F: 866.625.0839

COGENCYGLOBAL.COM

Account#: 120000000088

Date:	12/30/2019	<u> </u>		
Name:	Merritt Wa	lker		
Reference	#: 1166	979	_	
Entity Name				
Artic	les of Incorporation	/Authorization t	to Transact Business	3
Ame	ndment			
✓ Char	nge of Agent			
☐ Rein	statement			
Conv	version			
☐ Merg	ger			
☐ Disse	olution/Withdrawal			
☐ Fictit	ious Name			
☐ Othe	r			· · · · · · · · · · · · · · · · · · ·
Authorized .	Amount:	\$25		
Signature:				

F: +852.2682.9790

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: FRG INVES	TMENT	S, LLC			
2. (a)	Principal office address of limited liability company:	(b)	l	Mailing address of lin		
	(Note: MUST BE STREET ADDRESS)	_		( <u>Note: MAY BE F</u>	<u> </u>	<u> </u>
	No Change	_	No Char	nge	<del></del>	
	November 7, 2013	_		L1300015	57119	
3.	Date of filing/registration in Florida	4.		Document numb	per	
5. (a)	CHRIS SORENSEN			_		
·	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	e:		
	12735 GRAN BAY PARKWAY, SUITE 150					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<del>.</del>	2019 DEC SECRITALLY	" <b>n</b>
	JACKSONVILLE FI.	32258		-	EC 30	
(b)	COGENCY GLOBAL INC.				P	; i]
, ,	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	_	⊹	$\cup$
	115 North Calhoun St., Suite 4			_		
	NEW Registered Office Address:					
	Tallahassee, FL	32301		-		
the cha agent was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited his ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registability color of the limi	tered office mpany, it is ted liabilit	e and the business s hereby confirme y company or as	s office of the ed that the ch	registered inge(s)
	incent Burchianti	Vince	ent Burch			
	iture of a member or authorized representative of a member			Printed or typed na	•	
provis the ob- to mer	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I did in writing of this change.	ree to act performa d for in C hereby co	in this cape nce of my hapter 605 nfirm that	acity. I further a duties, and I am ) 5, F.S. Or, if this the limited liabili	gree to compl familiar with a document is l ity company h	y with the and accept being filed as been

Tim Mayville, Assistant Secretary Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent